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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

| _ | MAD | APP | | /A1 |
|---|------|-----|-----|-----|
| U | IVID | AFF | יטת | VML |
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OMB Number: 3235-0076

Expires: May 31, 2005

Estimated average burden hours per response.....16.00

| SEC | USE O | VLY |
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| Prefix | 1 | Serial |
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| | 2 1 5 |
|--|--|
| Name of Offering (check if this is an amendment and name has changed, and indicate change.) US Land Investments, LLC Equity Offering | A SECTION OF THE SECT |
| Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE | |
| Type of Filing: New Filing Amendment | DET 1 4 2003 |
| A. BASIC IDENTIFICATION DATA | |
| 1. Enter the information requested about the issuer | |
| Name of Issuer (check if this is an amendment and name has changed, and indicate change.) | (C) (S) |
| US Land Investments, LLC Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Included Control of Control | ling Area Cade) |
| Address of Executive Offices (Number and Street, City, State, Zip Code) 4521 Sharon Road, Suite 420 (Charlotte, NC 28211 704-442-2525 | ing Area Code/ |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including different from Executive Offices) | nding Area Code) |
| Brief Description of Business | |
| Real estate investment and development | |
| Type of Business Organization | PROCESSED |
| corporation limited partnership, already formed other (please specify): | 0000 |
| business trust limited partnership, to be formed | OCT 1 6 2003 |
| Actual or Estimated Date of Incorporation or Organization: Off 99 Actual Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) | THOMSON FINANCIAL |
| | ····· |
| GENERAL INSTRUCTIONS | |
| Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.50 77d(6). |) I et seq. or 15 U.S.C. |
| When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed wi and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that add which it is due, on the date it was mailed by United States registered or certified mail to that address. | |
| Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549. | |
| Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not man photocopies of the manually signed copy or bear typed or printed signatures. | nually signed must be |
| Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E as not be filed with the SEC. | |
| Filing Fee: There is no federal filing fee. | |
| State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in eare to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice this notice and must be completed. | ach state where sales proper amount shall |
| ATTENTION | |
| Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, fa appropriate federal notice will not result in a loss of an available state exemption unless such exemption is prefiling of a federal notice. | |

CR

| | | A. BASIC IDI | ENTIFICATION DATA: | | |
|--|-----------------------|----------------------------|--|---|---|
| 2. Enter the information re | quested for the foll | lowing: | | | |
| Each promoter of the | ne issuer, if the iss | uer has been organized w | vithin the past five years; | | |
| | | | | of, 10% or more of | a class of equity securities of the issuer. |
| | | | corporate general and mar | | |
| | | f partnership issuers. | , , | | |
| Lach general and it | | | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, i | f individual) | | | | |
| Asset Corp. of the South | n, LLC | | | | |
| Business or Residence Addre | ss (Number and | Street, City, State, Zip C | ode) | | |
| 4521 Sharon Road, Suit | e 420, Charlotte | e, NC 28211 | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, i | f individual) | | | | |
| Rosenburgh, Stephen A | • | | | | |
| Business or Residence Addre | | Street, City, State, Zip C | Code) | | |
| 4521 Sharon Road, Suit | e 420, Charlotte | e, NC 28211 | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, | if individual) | | | | |
| Lewchuk, Gordon N. | | | | | |
| Business or Residence Addre | ss (Number and | Street, City, State, Zip C | Code) | | |
| 4521 Sharon Road, Suit | te 420. Charlotte | e. NC 28211 | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, | if individual) | | | | |
| | | | | | |
| Business or Residence Addre | ess (Number and | Street, City, State, Zip C | Code) | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | Director | General and/or |
| Full Name (Last name first, | (Cindinidan) | | | | Managing Partner |
| Tati Name (Cast fibric 113t, | ir majviouai, | | | | |
| Business or Residence Addre | ess (Number and | Street, City, State, Zip C | Code) | 1 | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, | if individual) | | | | |
| Business or Residence Addr | ess (Number and | Street, City, State, Zip C | Code) | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, | if individual) | | ······································ | | |
| Business or Residence Addr | ess (Number and | Street, City, State, Zip (| Code) | | |
| ### | (Use bla | ink sheet, or copy and us | e additional copies of this | sheet, as necessary |) |

| | | 10000000000000000000000000000000000000 | | | B. IN | FORMATI | ON ABOUT | OFFERIN | iG | | | 4 30 | |
|---|--|--|-----------------------------|-------------|---|----------------|--|---|---|-----------------|---|--|----------|
| 1-4-4-2 | or an executable by Cultivities | - Baker and | - eyestemagis / | | | | | | ., | 0 | | Yes | No |
| 1. | Has the | issuer sold | , or does th | | | | | | | | *************************************** | | ⊠ |
| _ | 1177 - 1 | | | | | Appendix, | | | | | | § 50,00 | 00.00 |
| 2. | What is | the minim | um investm | ent that wi | n oe accel | nea from a | ny maividi | 1811 | *************************************** | *************** | *************** | Yes | No |
| 3. | | | permit joint | | | | | | | | | Ø | |
| 4. | Enter th | e informat | ion request | ed for each | person w | ho has been | n or will b | e paid or g | iven, direc | tly or indi | rectly, any | | |
| | commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state | | | | | | | | | | | | |
| | or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. | | | | | | | | | | | | |
| Fu | a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) | | | | | | | | | | | | |
| | | | | | | | | | | | | | · |
| Bu | Business or Residence Address (Number and Street, City, State, Zip Code) | | | | | | | | | | | | |
| Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers | | | | | | | | | | | | | |
| Sta | ites in Wh | ich Person | Listed Has | Solicited | or Intends | to Solicit F | urchasers | | | | | | |
| | (Check "All States" or check individual States) | | | | | | | | | | | | |
| | AL | [AK] | AZ | AR | CA | CO | CT | DE | DC | FL | GA | HI | ID |
| | IL | IN | 1A | KS | KY | LA | ME | MD | MA | MI | MN | MS | MO |
| | MT | NE | NV | NH | NJ | NM | NY | NC | ND | ОН | OK | OR | PA |
| | RI | SC | SD | TN | TX | UT | VT | VA | WA | WV | WI | WY | PR |
| Fu | Il Name (| Last name | first, if indi | ividual) | | | | | | | de accesso | | |
| Bu | siness or | Residence | : Address (1 | Number an | d Street, C | lity, State, 2 | Zip Code) | | | | | | |
| Na | ime of As | sociated B | roker or De | aler | | | | | | | | | |
| Z+- | ater in Un | iah Bazas | Listed Has | Collait-1 | or Intend | to Caliait | Durcharara | | | | | | |
| эu | | | i Listed Ha: s" or check | | • | | | | | | | A1 | l States |
| | | | | | | | | | | | | | |
| | AL | [AK] | AZ | AR | CA | CO | CT | DE | DC | FL | GA | HI | ID NO |
| | IL MT | IN NE | IA NV | KS NH | KY NJ | LA NM | ME NY | MD NC | MA ND | MI OH | MN OK | MS OR | MO PA |
| | RI | SC | SD | TN | TX | UT | VT | VA | WA | WV | WI | WY | PR |
| Fu | ll Name (| Last name | first, if ind | ividual) | | | ······································ | , <u>, , , , , , , , , , , , , , , , , , </u> | | | | | |
| Bu | isiness or | Residence | Address (1 | Number an | d Street. C | lity, State | Zip Code) | | | | | | |
| _ | | | | | | | | | | | | | |
| Nε | ime of As | sociated B | roker or De | aler | | | | | | | | | |
| Sta | ates in Wi | nich Person | 1 Listed Ha | s Solicited | or Intends | to Solicit | Purchasers | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | ······································ | |
| | (Check | "All State | s" or check | individual | States) | | | *************************************** | ••••••• | | ••••• | □ Ai | l States |
| | AL | AK | AZ | AR | CA | CO | CT | DE | DC | FL | GA | HI | [D] |
| | IL | [N] | IA | KS | KY | LA | ME | MD | MA | MI | MN | MS | MO |
| | MT RI | NE SC | NV SD | NH TN | NJ TX | NM) UT | NÝ VĨ | NC) VA | ND WA | OH WV | OK WI | OR WY | PA PR |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| 1. | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sum \) and indicate in the columns below the amounts of the securities offered for exchange and | | |
|----|--|-----------------------------|--|
| | Type of Security | Aggregate Offering Price | Amount Already Sold |
| | Debt | s 0 | § 0 |
| | Equity | | \$ 347,000.00 |
| | ☐ Common 🔀 Preferred | | |
| | Convertible Securities (including warrants) | § 0 | s 0 |
| | Partnership Interests | | <u>s</u> 0 |
| | Other (Specify) | | s 0 |
| | Total , | | \$347,000.00 |
| | Answer also in Appendix, Column 3, if filing under ULOE. | <u></u> | · • · · · · · · · · · · · · · · · · · · |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | : | Aggregate |
| | Accredited Investors | Number Investors | Dollar Amount of Purchases \$ 347,000.00 |
| | | | |
| | Non-accredited Investors | | \$0 \$0 |
| | Total (for filings under Rule 504 only) | <u> </u> | 30 |
| 3. | Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. | e | 5 1 |
| | Type of Offering | Type of Security | Dollar Amount Sold |
| | Rule 505 | • | sN/A |
| | Regulation A | | s N/A |
| | Rule 504 | | ş N/A |
| | Total | | sN/A |
| 4 | a. Furnish a statement of all expenses in connection with the issuance and distribution of th securities in this offering. Exclude amounts relating solely to organization expenses of the insure. The information may be given as subject to future contingencies. If the amount of an expenditure in not known, furnish an estimate and check the box to the left of the estimate. | e | |
| | Transfer Agent's Fees | ····· | |
| | Printing and Engraving Costs | | § 5,000.00 |
| | Legal Fees, | | |
| | Accounting Fees | | <u>\$5,000.00</u> |
| | Engineering Fees | | \$ <u>0.00</u> |
| | Sales Commissions (specify finders' fees separately) | | \$ <u>1,250,000.00</u> |
| | Other Expenses (identify) | | 0.00 |
| | Total | | \$ 1,310,000.00 |

| Fin | | | en samuel en en en en | |
|-----|--|---|--|------------------------|
| | C. OFFERING PRICE, NUMBI | ER OF INVESTORS, EXPENSES AND USE OF PI | KOCERDS | |
| | b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — Q proceeds to the issuer." | uestion 4.a. This difference is the "adjusted gross | | <u>\$23,690,000.00</u> |
| 5. | Indicate below the amount of the adjusted gross proceeds of the purposes shown. If the amount for any check the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part Co. | purpose is not known, furnish an estimate and he payments listed must equal the adjusted gross | | |
| | | | Payments to Officers, Directors, & Affiliates | Payments to Others |
| | Salaries and fees | | <u> Տ</u> | \$2,369,000.00 |
| | Purchase of real estate | | | \$\frac{0.00}{} |
| | Purchase, rental or leasing and installation of mach and equipment | inery | ¬\$0.00 | \$0.00 |
| | Construction or leasing of plant buildings and facil | | | \$0.00 |
| | Acquisition of other businesses (including the value offering that may be used in exchange for the assets issuer pursuant to a merger) | e of securities involved in this s or securities of another | | □\$0.00 |
| | Repayment of indebtedness | | | □ \$ 0.00 |
| | Working capital | | | \$21,321,000.00 |
| | Other (specify): | | s | s |
| | | | | _ 🗆 \$ |
| | Column Totals | [| \$ <u>0.00</u> | \$23,690,000.00 |
| | Total Payments Listed (column totals added) | | ☐ \$ 23 | ,690,000.00 |
| 100 | | D. FEDERAL SIGNATURE | iji. | |
| sig | e issuer has duly caused this notice to be signed by the constitutes an undertaking by the issuer to furn information furnished by the issuer to any non-accre | ish to the U.S. Securities and Exchange Commis | sion, upon writt | |
| Iss | uer (Print or Type) | Signapare/ | Date / | |
| U | S Land Investments, LLC | Chreeless 1 | lent 2 | 3/63 |
| | me of Signer (Print or Type) | Title of Signer (Print or Type) | · · · · · · · · · · · · · · · · · · · | 10) |
| S | ephen A. Rosenburgh | Manager | | |

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

| | E. STATE SIGNATURE | n ne de la companie d | | and the second | | | | | |
|-----------|---|--|--------|----------------|--|--|--|--|--|
| 1. | Is any party described in 17 CFR 230,262 presently subject to any of the disqualification provisions of such rule? | Y | ∕es | No ⊠ | | | | | |
| | See Appendix, Column 5, for state response. | | | | | | | | |
| 2. | The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law. | | | | | | | | |
| 3. | The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees. | | | | | | | | |
| 4. | The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied. | | | | | | | | |
| | uer has read this notification and knows the contents to be true and has duly caused this notice to be signed on athorized person. | its behalf | by the | undersigned | | | | | |
| Issuer (I | (Print or Type) Signature Date | | | | | | | | |
| US Laı | and Investments, LLC | NA D | 30 | 3 | | | | | |
| Name (I | (Print or Type) Title (Print or Type) | | ,- | | | | | | |

Manager

Stephen A. Rosenburgh

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

| | APPENDIX | | | | | | | | | |
|-------|--------------------------------|------------------------------|--|--------------------------------------|--|--|--------|-----|--|--|
| 1 | Intend to non-a investor | to sell ccredited s in State | Type of security and aggregate offering price offered in state (Part C-Item 1) | | Type of investor and amount purchased in State (Part C-Item 2) | | | | 5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) | |
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No | |
| AL | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| AK | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| AZ | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| AR | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| CA | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| со | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| СТ | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| DE | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| DC | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| FL | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| GA | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| НІ | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| ID | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| IL | <u></u> | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| IN | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| IA | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| KS | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| KY | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| LA | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| ME | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| MD | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| MA | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| MI | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| MN | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| MS | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |

APPENDIX 2 1 3 Disqualification under State ULOE Type of security (if yes, attach Intend to sell and aggregate explanation of Type of investor and offering price to non-accredited waiver granted) amount purchased in State offered in state investors in State (Part E-Item 1) (Part C-Item 2) (Part B-Item 1) (Part C-Item 1) Number of Number of Non-Accredited Accredited Yes No Investors No Investors Amount Amount State Yes MO N/A X N/A N/A N/A N/A N/A N/A MT X N/A N/A N/A N/A N/A N/A N/A NE N/AN/A N/A N/A N/A N/A N/A NV X N/A N/A N/A N/A N/A N/A N/A NH N/A N/A N/A N/A N/A N/A N/A NJ X N/A N/A N/A N/A N/A N/A N/A NM N/A X N/A N/A N/A N/A N/A N/A NY N/A X N/A N/A N/A N/A N/A N/A NC X X \$347,000.00 0 Equity \$25,000,000.00 ND X N/A N/A N/A N/A N/A N/A N/A OH X N/A N/A N/A N/A N/A N/A N/A OK N/A N/A N/A N/A N/A N/A N/A OR N/A N/A N/A N/A N/A N/A N/A PA N/A X N/A N/A N/A N/A N/A N/A RI X N/A N/A N/A N/A N/A N/A N/A SC X Equity \$25,000,000.00 SD N/A N/A N/A N/A N/A N/A N/A TN X N/A N/A N/A N/A N/A N/A N/A TXX N/A N/A N/A N/A N/A N/A N/A UT X N/A N/A N/A N/A N/A N/A N/A VT X N/A N/A N/A N/A N/A N/A N/A VA X N/A N/A N/A N/A N/A N/A N/A WA N/A N/A N/A N/A N/A N/A N/A WV N/A N/A N/A N/A N/A N/A N/A WI X N/A N/A N/A N/A N/A N/A N/A

| 1 | 2 3 Intend to sell to non-accredited investors in State (Part B-Item 1) Type of security and aggregate offering price offered in state (Part C-Item 1) | | APPENDIX 4 Type of investor and amount purchased in State (Part C-Item 2) | | | | under St (if yes explan waiver | 5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) | |
|-------|--|----|---|--------------------------------------|--------|--|---|--|-----|
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No |
| WY | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| PR | | X | N/A | N/A | N/A | N/A | N/A | N/A | N/A |